FORM-GB

Revised 06/08

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 503319

Fax: (515)281-4073 www.lowa.gov/ethics



2011 NOV 10 PM 3: 36

lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lower or received by the Governor on behalf of the state be reported to the towa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state		
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EPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUES	T:
STATE TRAINING SCHOOL	
Name of Department or Office 3211 EDGINOTON AVENUE EL	DORA IA 50627
	ity, State, Zip Code
Area Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFIC	ZE:
Kristin Hagedon	
Name	
Mailing Address (if different from above)	City, State, Zip (if different from above)
khagedo@dhs.state.ia.us	Ann Code 9 Tologham Number 61 different from about
Email Address	Area Code & Telephone Number (if different from above)
ONOR OF GIFT OR BEQUEST:	
American Legion Aux. #262, c/o Ms. Evelyn Fredrichs	
Name	
PO Box 443 Wall Lake, IA 51466	
Mailing Address City, State, Zip Code	11/10/11 \$25.00
	Date of Gift or Bequest Amount/Value"
Area Code & Telephone Number	"value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
Email Address (optional)	
Provide a description of the gift or bequest and purpose thereof: cash donation to be used towards student Christmas if	fund
Criteria to use this form:	
Receipt of any gift or bequest that is received by any department of the	state or received by the Governor on behalf of the state.
tatement of Affirmation:	
	ve is accurate. I further affirm that the information concerning the donor and
ssessment of the fair market value (if applicable) is correct and true to the	best of my knowledge.
Kristin Hagedon	Nov. 10, 2011
Signature	Date

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD 510 EAST 12TH, SUITE 1A DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the state of lowa or received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

	Gift or Bequest information received by a department or accepted by the Governor on behalf of the state
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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUEST:

DHS Glenwood Resource Center			
Name of Department or Office	Department or Office		
Mailing Address 712-525-1683	Glenwood, IA 51534 City, State, Zip Code		
Area Code & Telephone No.			
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OF	FICE:		
Name			
Mailing Address (if different from above)	City, State, Zip (if different from above)		
Email Address	Area Code & Telephone Number (if different from above)		
DONOR OF OUT OF PROUEST			
DONOR OF GIFT OR BEQUEST:			
Brady Werger	_		
Name			
116 Augusta Circle Waverly, IA 50677	_		
Mailing Address City, State, Zip Code	10/29/11 \$325.00		
Area Code & Telephone Number	Date of Gift or Bequest Amount/Value*		
Alex Code & Telephone Number	*value is defined as "fair market value" of item as determined by		
Email Address (optional)	receiving department or office. If no value mark "0.00".		
Provide a description of the gift or bequest and purpose thereof:			
Drum set for use by Clients			
Criteria to use this form:			
Receipt of any gift or bequest that is received by any department of th	ne state or received by the Governor on behalf of the state		
the control of the co	is dute of 10001100 by the covernor on behalf of the state.		
Statement of Affirmation:			
Ruth Messinger	pove is accurate. I further affirm that the information concerning the donor and		
ssessment of the fair market value (if applicable) is correct and true to the	he best of my knowledge.		
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	11/07/0011		
Kith Messinger	11/07/2011		
Signature	Date		

IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

510 EAST 12TH, SUITE 1A DES MOINES, IA 50319 Fax: (515)281-4073 www.iowa.gov/ethics



lowa Code section 8.7 requires all gifts and bequests given to any department of the or received by the Governor on behalf of the state be reported to the lowa Ethics an Disclosure Board and the Government Oversight Committee. The Board will provid this report to the Government Oversight Committee. This form is to be filed within 2 receipt of the gift or bequest.

	Governor on behalf of the state	
e state of lowa nd Campaign le a copy of 20 days of	NOV For online use only	
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FORM-GB

Gift or Bequest information received

by a department or accepted by the

DEPARTMENT	OR OFFICE	RECEIVING THE	GIFT OF	R BEQUEST:
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DEPARTMENT OR OFFICE RECEIVING THE GIFT OR BEQUI	ES1:
DHS Glenwood Resource Center	
Name of Department or Office 711 South Vine Street	Glenwood, IA 51534
Mailing Address 712-525-1683	City, State, Zip Code
Area Code & Telephone No.	
CONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFF	FICE:
Name	
Mailing Address (if different from above)	City, State, Zip (if different from above)
	Oity, State, Zip (ii dillefelit from above)
Email Address	Area Code & Telephone Number (if different from above)
DONOR OF GIFT OR BEQUEST:	
Glori Hall	
Name	-
513 West St Whitney, IA 51063	
Mailing Address City, State, Zip Code	10/24/2011 \$735.00
	Date of Gift or Bequest Amount/Value*
Area Code & Telephone Number	*value is defined as "fair market value" of item as determined by
Email Address (optional)	receiving department or office. If no value mark "0.00".
Provide a description of the gift or bequest and purpose thereof:	
Premier jewelry for Client use	
Criteria to use this form:	
Receipt of any gift or bequest that is received by any department of the	e state or received by the Governor on behalf of the state.
tatement of Affirmation:	
Ruth Messinger	
affirm that the gift or bequest reported absessment of the fair market value (if applicable) is correct and true to the	ove is accurate. I further affirm that the information concerning the donor and
second of the fall market value (ii applicable) is correct and true to the	ie best of my knowledge.
\sim \sim	
Lith Messenger	11/07/2011
Signature	Date